Current FSSA Technology Environment

Background

The assessment of the current state was performed within the context of the mission of IT within the Eligibility Improvement Project, and the FSSA CIO's current goals and priorities, summarized below:

1) IT Mission in Context of Eligibility Project
   a) Improve integrity (accuracy, currency & completeness) of eligibility information
   b) Enable business process improvement & streamlined workflow (intake, assessment, expert calculation)
   c) Deliver relevant information where needed into service delivery environments
   d) Increase precision in business decision making
2) FSSA CIO's current goals and priorities
   a) Improving core processes and standards (business and technical, following MITA)
   b) Application consolidation (initial focus: case management and claims processing)
   c) Enterprise / Social Services Data Warehouse

Key Current FSSA DTS Initiatives

The following key system and technical initiatives have been noted. The eligibility improvement project needs to be coordinated with these initiatives.

1) Social Services Data Warehouse development project
2) Medicaid Information Technical Architecture (MITA) initiative
3) Case Management Application consolidation initiative

Status of Current State Assessment

The IT current state assessment examines the Family and Social Services Administration applications maintained by the Division of Technology Services, with its primary focus being those systems that are related to eligibility and case management processes.

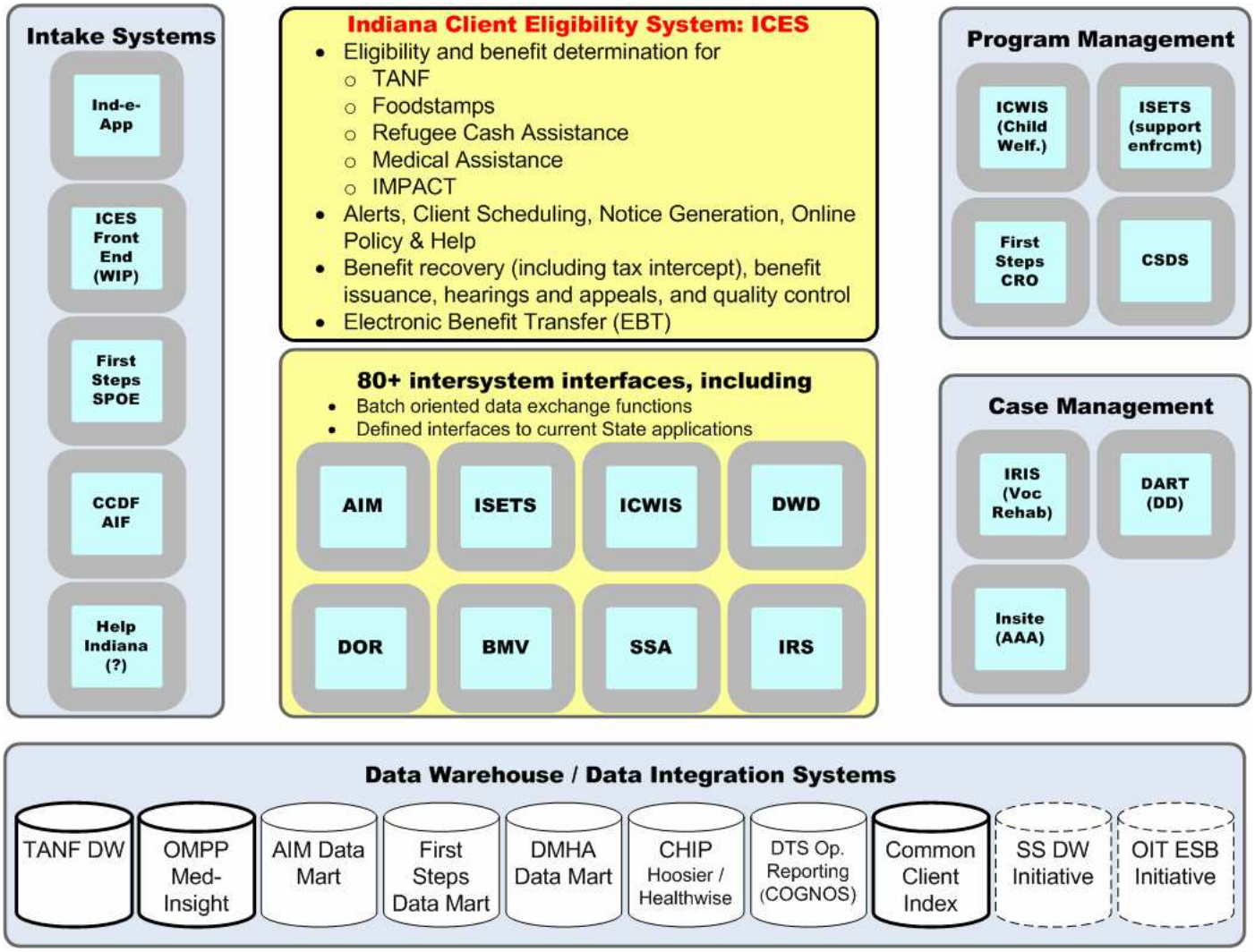
Application System profiles are based on information and staff interviews provided by the state. Application profiles vary in depth depending on the system information that was known and/or made available at the time of authoring. Please see the individual sections herein, as well as the associated

reference Zip for itemization and description of our current state information sources.

Please see the RFI Document Library for external documents referenced herein.

Overview of Assessed Systems

The following graphic provides a visual overview of the systems reviewed for this Current State Assessment:



Indiana Client Eligibility System (ICES)

Overview

Reference Documents

The following ICES information was requested from FSSA and DTS Staff:

- 'Indiana Client Eligibility System Overview.doc'
- 'Technology & Contract Consolidation 8-9-05.xls'
- Eligibility Determination Error Reporting Overview
    - Overview of programmatic error-reporting capabilities 'Nickreport.doc'
    - Summary Application Disposition Report
- ICES Interface Itemization Matrix
- Deloitte (ICES) Final 8.31.04.doc' (Contractor Quality Control Measures)

System Overview

The Indiana Client Eligibility System (ICES) is the automated system supporting the operations of the Family and Social Services Administration, Division of Family Resources. ICES has been a FAMIS certified online integrated eligibility system since 1994. Indiana was federally mandated to replace its old, manual eligibility system in 1991. Ohio's eligibility system (CRIS-E) was transferred to Indiana in 1991 and modified to meet the needs of Indiana's clients. ICES was piloted in 1992 and the statewide rollout was completed in 1993. Final federal certification was received in 1994. ICES was transferred, developed and is currently being maintained, Enhanced and Modified by Deloitte Consulting and a team of Indiana FSSA employees. Deloitte's support contract comes to a close September 30, 2006.

ICES is an IBM mainframe application, run on MVS using the IMS database platform.

ICES supports the worker by determining eligibility and benefit level for Temporary Assistance for Needy Families (TANF), Food Stamps (FS), Refugee Cash Assistance (RCA), and multiple categories of Medical Assistance based on answers to questions input by workers, relieving them from multiple forms and manual calculations. ICES provides a clearance process whereby each individual is assigned a unique Recipient Identification (RID) number that follows the individual through all current and future ICES eligibility. This RID is also used as a key for several data exchanges. ICES further supports the worker by providing alerts, client scheduling, generation of notices, data exchanges, mass changes and an online policy manual. ICES also supports Indiana Manpower and

Comprehensive Training (IMPACT), benefit recovery (including a scratchpad and tax intercept data exchange), benefit issuance, hearings and appeals and quality control. ICES is the primary source for the delivery of TANF and FS benefits via the Electronic Benefit Transfer (EBT) system. Additionally, ICES sends and receives data from over 90 interfaces through the batch process. Each online screen has direct access to extensive help screen information.

ICES is accessed by about 3,800 users statewide from approximately 125 remote sites. It contains over 450 screens, 2.4 million lines of code, and handles nearly 3 million transactions each business day. ICES supports all counties statewide and the central office in effectively administering benefits. It is used extensively by eligibility workers and supervisors, IMPACT workers and supervisors, and county and district administrators, as well as outside agencies that are dependent upon various data exchanges with ICES.

The multiple modules that make up ICES are complex and subject to frequent federal and state regulatory changes and requests for increased functionality. ICES is operated by IBM and has minimum down time. All programs are written in COBOL II, with the exception of some reports, which are written in EZTRIEVE PLUS. All online programs are written using the Telon development tool. The majority of system generated reports are available online using COGNOS. PC's used by all staff are connected via WAN links to Indianapolis allowing for update to ICES via Attachmate's 3270 emulator. It is estimated to cost $13.3M annually for ICES application administration.

There are over 82 ICES interfaces, including: Medicaid (AIM); Child Support (ISETS); Child Welfare (ICWIS) (9/01); Workforce Development (DWD); Disqualified Recipient System (FNS); Social Security Administration (SSA); School Lunch Program (DOE); CHIP Premium Collection (OSI); Unearned Income Data Exchange (IRS); State and Federal Tax Intercept (IDOR); Motor Vehicle Registration (BMV); Child Care (BCD); ABT TANF Extract (ABT); Electronic Benefits Transfer (EBT) (4/23/01 - Citibank); Welfare Reform Federal Reports (WRIDB) and ICES subsystem Impact Assessment Tool (IAT) a web based tool that allows ICES workers to review data stored on a DTS server.

Eligibility Determination Error Reporting and Management

It is known that IN FSSA, like many State agencies, faces knowledge sharing and criteria consistency issues. As reported in KPMG FSSA Audit the guidelines for Food Stamps and TANF applications to determine eligibility are often unclear or inaccurate. Paired with unmanageable

Social Worker caseloads application information is often incomplete or unverified and inevitably leading to eligibility determination errors.

Another layer of complexity is added by the fact that the Indiana eligibility system has multiple points of entry from which multiple applications are used to determine eligibility in various locations. There is currently little FSSA of how each location determines eligibility or verification processes.

Eligibility error rate reporting is an anticipated future Federal requirement for assistance programs such as Food Stamps, Medicaid and CCBG. Indiana currently does not have the capabilities to easily query applications or Data Warehouses for this type of report information.

Key FSSA Program Intake Applications

ICES Screening and Intake Front End Initiative

Reference Documents

- 'Web Development Overview.ppt' (ICES Screening and Intake Front End Initiative/Deloitte
- 'ICES Front End screen mock-ups - Deloitte Update 8-05.tif'

System Overview

Deloitte has proposed the implementation of a common screening and intake front end capability for ICES. The current status of this initiative needs further clarification.

Objectives of this initiative are:

- Build the foundation for a phased migration to a new Welfare Service Delivery Model to reduce cost and provide enhanced service to the clients
- Introduce new "channels" of screening and applying for services
- Provide the general public an option to apply for services via a web-based self- service option
- Provide community based partners/call centers a means to assist clients in applying for service
- Provide basis for common intake for application to other Agency program services

Deloitte proposes to meet these objectives in two phases:

PHASE I - Web based Screening and Referral for Cash Assistance (TANF), Medicaid and Food Stamps

PHASE II - Web based Applications for Cash Assistance (TANF), Medicaid and Food Stamp benefits; Automated data transfer of Cash Assistance (TANF), Medicaid and Food Stamp benefits application information to the ICES system

'Ind-e-App'

System Overview

The Ind-e-App is an innovative Web-based system that provides an efficient one-stop approach to eligibility determination for and application in a range of public-sector health programs. The Ind-e-App was created by

Marion County's Safety Net Hospital Wishard Health Advantage to streamline the enrollment process by collecting data from a client once, instead of multiple times (often at different locations). Wishard Health Advantage system administers the Health Advantage program for indigent Marion County residents that are at or below 200 percent of the federal poverty level. The Health Advantage program is the payor of last resort creating the need to identify eligible clients and complete their application for the Medicaid Program prior to enrollment in Health Advantage. The Ind-e-App also assists with online provider selection, verification document management, workflow management, disposition tracking and report generation.

The demonstrated benefits of the Ind-e-App include improved customer service, increased application accuracy (from 30 thousand client to 55 thousand clients), increased financial counselor accountability, an expedited application and enrollment process for Health Advantage (from approximately 2 weeks to 2 hours facilitated by the ability to receive financial verification documentation by toll-free fax), expedited receipt of Medicaid reimbursements and access to reliable data regarding the indigent population of Marion County. Health Advantage Marion County community-based partners use the system to screen and enroll individuals and families in Health Advantage and those that are Medicaid certified can produce Medicaid Applications.

The 'Ind-e-App' has the capability to interface with state and local eligibility systems and electronically transmit application information rather then sending it by mail. However, this functionality is not currently utilized as the State has not agreed to accept electronic Medicaid enrollment applications. Instead application are completed with the Ind-e-App and then printed and mailed to the state to be keyed into ICES directly. Applicants are who are eligible for Food Stamps, WIC, TANF and other public programs are referred to the Department pf Family and Children's Services for enrollment. The Ind-e-App was developed by Deloitte Consulting and is modeled after California and Arizona's 'One-e-App' implementations. California currently has 3 successful county implementation and 3 others under way. The California Healthcare Foundation is currently promoting state-wide implementation at the county level. Deloitte Consulting also developed the Indiana Client Eligibility System and took care to ensure that the Ind-e-App would meet all of the ICES data requirements for smooth integration. Ind-e-App (one-e-app) licenses are held by the California Healthcare Foundation for whom the product was initially developed.

Several years ago there was an effort to take the Ind-e-App to the state for consideration of state-wide implementation. During this time there were

'HELPIndiana' implementation efforts underway and while the State was interested in the revenue it was suggested that the two product teams work to bring the applications functionality together. Working sessions between HELPIndiana and Ind-e-App team members reveled that the systems were almost identical, the difference being that the Ind-e-App was already successfully implemented. It appeared that Covansys, who was contracted to implement HELPIndiana and the State team were not interested in collaborating with Deloitte and Ind-e-App staff.

While the Ind-e-App was developed with the intent of turning the system over to the state there is no active procurement to do so at this time. There has, however, been repeated interest from other Indiana Counties and Safety Net providers in the system.

First Steps - System Point of Entry (SPOE)

Reference Documents

- 'Technology & Contract Consolidation 8-9-05.xls'
- First Steps - http://www.state.in.us/fssa/first_step.html

System Overview

First Steps Intake System is a local program that feeds CRO database.

First Steps SPOE was developed by and is currently maintained by Covansys. SPOE has approximately 22 Users and services about 15,000 clients. SPOE tracks and reports on approximately 3,000 providers of health therapies and special education.

SPOE operating system is Windows 95 and is a custom application. VB 6.0 3 tier component-base architecture distributed com & 2mts & 3 IIS. CRO is SQL Database with Access and Crystal Reporting tools. SPOE is located in 14 clusters throughout Indiana. Production is off campus at Covansys facility in Kansas. Development is done off campus at Covansys facility Kansas & FSS00IT28. Ideally the SPOE should access one main database instead of several small ones however funding is an issue for enhancements and improvements.

SPOE interfaces only with the Covansys system.

Child Care Development Fund Automated Intake System (AIS)

Reference Documents

- 'Technology & Contract Consolidation 8-9-05.xls'

- AIS System Profile - www.acf.hhs.gov

System Overview

The Automated Intake System (AIS) a state system supported by the Family and Social Services Administration (FSSA), Division of Family and Children (DFC). The DFC bureau of Child Development administers the Child Care and Development Fund (CCDF) that provides eligible families child care subsidies and funds. Since April of 1991 program intake agents utilize the AIS system to manage the eligibility process including functions such as determining eligibility, performing recertification's, issuing vouchers, managing wait lists and determining if funds are available for their county.

AIS was developed by The Consultants Consortium (TCC) and is currently maintained and supported by DTS. The AIS system interfaces with the Bureau of Child Development (BCD) Licensing system and with the Indiana and Statewide Child Care Resources & Referral system to determine provider eligibility for the CCDF program. The system also interfaces with the Central Reimbursement Organization (CRO) to enable payments to be made for authorized services.

AIS has approximately 100 - 150 County Intake users and serves about 37,000 plus children per month. There are approximately 15,000 families on the CCDF waiting list that AIS also tracks. AIS also tracks over 5,100 providers. AIS allows for centralized control of over $150M in federal funding but is a complex system due to Federal budgeting requirements & State legislation regarding provider eligible for entry into the system.

It is estimated that CCDF AIS has an annual cost of over $1.1M; 19% of which funded by the Federal grants.

AIS operating system is Windows 2000.
Languages - Visual Basic 6.0 / VSView 7.0
DBMS - SQL Server 2000

HELPIndiana

Note: HELPIndiana is a failed systems initiative that while having many merits was the subject of a conflict of interest complaint and public inquiry into its primary FSSA sponsor, which resulted in the project's termination. Nevertheless there is useful contextual and

potentially technical resources that may be leveraged moving forward, hence we have included this summary herein.

Reference Documents

- Help Indiana overview documentation and current status
- 'HELP Indiana.doc' - National Association of State Chief Information Officers (NASCIO)
  2003 Recognition Award Nomination
  https://www.nascio.org/nascioCommittees/nominations/

System Overview

In December 2001, Indiana Family and Social Services Administration (FSSA) Secretary John Hamilton established a set of Key Biennium Priorities for the FSSA. One of those priorities was to develop and implement a program enabling the family support system to become family-centered, provide integrated services, and deliver measurable results. That vision became a reality in January 2003 with the introduction of a program called HelpIndiana.

HelpIndiana is a web-based tool to pre-screen eligibility for more than 20 government programs and benefits in one interview. The interface can be accessed via the Internet at any state office or community center. HelpIndiana provides "one-stop shop" screening for the following programs:

- Children and Family Benefits
- Education and Training
- Emergency Cash Assistance
- Employment
- Financial Assistance
- Health Related Benefits
- Housing and/or Utilities
- Legal Assistance Programs

In order to determine services for which an individual is eligible, the caseworker logs into HelpIndiana via an Internet browser. Caseworkers ask a series of questions related to age, income, assets, household size, education and medical background. Based on the information provided, the system will generate a list of benefits and services from the programs for which the individual may qualify. HelpIndiana also provides an explanation of services

for which the individual was determined to be ineligible. Finally, screened individuals receive automated referrals, a list of office locations where they can apply for services, and a list of all documents and verifications needed for the application process.

Under Indiana Family and Social Services leadership, the HelpIndiana initiative brought together the following government agencies:

- Division of Family and Children (Child Support, Housing, Child Care, First Steps, Food Stamps, Head Start, and many others)
- Department of Health (Children's Special Health Care, Women Infants and Children)
- Department of Workforce Development (Unemployment Insurance and Workforce Investment Act Programs)
- Division of Disability, Aging and Rehabilitative Services (Vocational Rehab., CHOICE)
- Office of Medicaid Policy and Planning (Hoosier Healthwise, Hoosier Rx and Medicaid Programs)
- Division of Mental Health and Addiction
- Department of Commerce (Individual Development Accounts)
- Local Programs such as the Township Program and Earned Income Tax Credit

Benefits realized by service recipients, taxpayers, agency or state:

- For the participating agencies, consolidating and coordinating the pre-screening eligibility process for more than 20 Indiana programs across eight (8) state and local agencies provides caseworkers with a consistent, easy-to-use system to provide the right services to the right people. This method allows caseworkers to pinpoint which specific services should be provided to their clients, thus allowing them to accurately focus their efforts.
- Based on the information provided to the caseworker, the system will generate a list of benefits and services for which the individual may qualify. Because HelpIndiana includes a complete inventory of available services, it may identify programs for the applicants that were previously unknown to them. HelpIndiana also provides an explanation of services for which the individual was determined to be ineligible.

- Screened individuals will receive automated referrals and information on office locations where they can apply for services, plus a list of all documents and verifications needed for the application process.
- Program providers also benefit from the HelpIndiana system. Through HelpIndiana, providers become part of an integrated service delivery plan, increasing the odds of achieving positive outcomes from each service provided.

Return on investment, short-term/long-term payback (including summary calculations).

- Initial $5 million investment recouped in three (3) years through the elimination of contractual services to conduct IMPACT (welfare to work) assessments. Prior to HelpIndiana, the state contracted for caseworker services to conduct these assessments. HelpIndiana enables FSSA to conduct these assessments with existing staff, saving $5 million in contract cost over three years.
- In its vision HelpIndiana will be the intake system for all health and human services and will be available to anyone who has a Web browser, saving time for everyone involved and insuring complete and consistent delivery of services.

HelpIndiana is a client/server application that utilizes Internet Explorer Web Browser on the users' workstations. The suite of programming tools used includes Borland and Oracle. The application also requires Adobe Acrobat Reader to allow the user to open online forms.

It is built on Oracle database and the Microsoft Internet Information server. Programming tools used include Delphi, Oracle PL/SQL, JavaScript, HTML, and .NET. The Web products are designed as industry standard thin-client, three-tier applications utilizing the Microsoft Web API (ISAPI). The diagram below represents a high-level view of HelpIndiana Web application architecture.

Key Program Management Systems

Indiana Child Welfare Information System (ICWIS)

Reference Documents

- 'Technology & Contract Consolidation 8-9-05.xls'
- AIS System Profile - www.acf.hhs.gov

System Overview

The Indian Child Welfare Information System supports all applications related to child welfare including Intake, Investigation of Child Abuse and Neglect, Special Needs, Case Management, Eligibility, Resources, Foster Care and Child Care licensing, Adoption and specialized programs such as Waiver and Assisted Guardianship.

The Indiana Child Welfare Information System is a state system that was developed in 1991 by Unisys. ICWIS is a distributed database designed to support the security requirements of the State. ICWIS has approximately 1,500 plus family case manager, supervisor, administrator, clerical users and limited contract users. ICWIS serves approximately 70,000 clients and over 31,000 foster care providers. By design, the application allows county users to dial into another county server should their own server go down.

The ICWIS application interfaces with Indiana Support Enforcement Tracking System (ISETS), ICES, Courts, Data Warehouse, (AFCARS) and NCANDS utilities, and a program called Civic Net (an interchange of information specific to the largest county in state). Information shared is generally client specific and is available to both systems.

Unisys currently has am annual contract of $10.4M to maintain and support ICWIS until January 31, 2007. Information Processing Procurement Request is currently contracted through June of 2007 for FY06 $5.3M and FY07 $1.3M.

The ICWIS application is continuously being refined. Migrations are scheduled on a monthly basis to upgrade application program and enhance the operating environment. Plans include the use of the Web and PDAs for certain functions of the application.

Type of Application -Multiple Database
Type of Platform - Distributed
Hardware Platform - Netfiniti Server

Operating System - MS2000
Languages – Powerbuilder, DBMS, ORACLE

Indiana Support Enforcement Tracking System (ISETS)

Reference Documents

- 'Technology & Contract Consolidation 8-9-05.xls'

System Overview

ISETS is a FSSA/DTS supervised and county administered system. The Department of Information Technology currently maintains the mainframe and completes day to day operations and support of the system and peripherals. The system was developed in 1999 by and is currently maintained by Deloitte Consulting. Deloittes' contract to provide critical and necessary support and maintenance for ISET expires Sept. 2006 with a 2 year option.

ISETS is a distributed database application that creates, configures, and updates case and financial information, concerning child support obligation payments received from the non-custodial parents (NCP). It provides a tracking mechanism to locate the NCP, through various locate functionalities. It provides the feedback and reporting mechanism to state and federal agencies.

The application exchanges the information pertaining to NCPs, CPs, and financials with various public and private organizations. Usually this is through data exchange between this application and the system used by the respective organizations. The information exchanged could be wages, demographic, employment, property, etc. for the purposes of establishing cases or for resolving financial obligations. FSSA interfaces include TANF Benefit Recovery FTP or batch information and non-FSSA interfaces include Federal Case Registry, State and Federal Tax Systems, Bureau of Motor Vehicles, Unemployment Insurance Wage Records, and Professional License Suspensions/Credit Bureau Reporting.

There are approximately 2000 users across the state with 84 in Central Office, plus County Court Clerks' and Prosecutors' Offices staff. There are estimated to be 800,000 cases tracked in ISETS. The user experience has not always been satisfactory as Deloitte Consulting is currently developing a more web-like user interface.

ISETS has an OS390 for the IBM 390;AS/400a, IN uses OS400, operating system and the language used in the application system

is Cobol ;JCL;TELON;CICS. Annual application costs only are upwards of $16M, sixty-six percent of which is federally funded.

First Steps – Central Reimbursements Office (CRO)

Reference Documents

- 'Technology & Contract Consolidation 8-9-05.xls'
- First Steps - http://www.state.in.us/fssa/first_step.html

System Overview

First Steps Central Reimbursement Office (CRO) is a comprehensive data and financial system that can monitor and manage the level of early intervention resources and supports the enrollment, credentialing of providers and the distribution of provider vouchers. CRO is used to track all relevant state, federal and local resources available to support early intervention services and activities. CRO handles all reimbursement to providers for early intervention services rendered, financial and data reporting needs of various federal, state, and local funding sources and ensures minimum duplication of effort to collect, maintain and report relevant data.

CRO was developed by and is currently supported and maintained by Covansys. However, support and maintenance may be transitioned to EDS February 1, 2006. There are currently 16 Grantee and Contractor users of CRO that use the system to serve approximately 15,000 clients. CRO server and operating system is Windows 95 and is a SQL Database with Cognos cubes in addition to using the data warehouse used for reporting. Covansys sends CRO information back to their warehouse database and DTS uploads the information into the FSSA warehouse. Development Language is VB 6.0 32bit SP4 web base connection SSL/Java Socket Connection.

CRO interfaces with Data Warehouse, EDS (HIPAA Files) and there is a monthly matching to ICES. There are also interfaces with private insurance companies as providers use Covansys for Third Party billing. Application only annual cost is approximately $93K.

Community Service Data System (CSDS)

Reference Documents

- 'Technology & Contract Consolidation 8-9-05.xls'

System Overview

Community Services Data System: Web-based system collects data for the purpose of providing contract info regarding client eligibility, enrollment, initiation, verification of reimbursement claims, client service, and revenue info and meeting Federal Minimum Data Set (MDS) requirements. Used by all providers and DMHA.

CSDS was developed by and is currently supported and maintained by Clayton Technology. There are currently 200+ providers using CSDS to service approximately 105,000 clients.

CSDS is Web based Oracle backend and hosted and housed by the vendor. CSDS using Crystal reporting. CSDS is operational 24 hours a day 7 days a week. Draw backs are that new data elements can not be added and that the data has just about outgrown the system. CSDS Interfaces with FSSA Claims Management System Auditing/Accounting System, Data Mart, & DMHA Certification System. Non-FSSA Interfaces include Web based interface to Community providers then data is then pulled into the common drive on it way to the Clayton System.

CSDS is funded 50% by federal grants.

FSSA DTS Case Management Applications

This section describes current systems in FSSA that perform core case management functions. Note that these systems also provide other functions, including some level of eligibility determination. The reason for the separate treatment herein is that the "case management" systems herein are targeted for consolidation by a specific initiative within FSSA DTS.

IRIS

Reference Documents

- 'Technology & Contract Consolidation 8-9-05.xls'
- Interview with Rob Posluszny 8.23.05

- 'RFP-4-46.doc', '46attd.doc', '46atte.doc', '46attf.doc', '46attf(27AUG04)v2.doc', 'Request for Clarification (27AUG2004).doc', 'RFP 4-46 Recommendation Letter.pdf'

System Overview

The Indiana Rehabilitation Information System (IRIS) is a comprehensive case management system with a focus on placing clients in work settings. IRIS is an employment outcome program that can be used as a case tracking and administration tool by counselors in all programs that focus on placing clients in work settings. IRIS tracks the events related to a case from the point of referral, eligibility determination, service rendering, and placement, to the ultimate closure of a case and subsequent follow-up.

Information captured with IRIS is designed to help a counselor understand the unique problems, concerns, and employment requirements of a client. IRIS protects the confidentiality of customer and case information. IRIS meets all federal 911 reporting requirements. IRIS has an open architecture to protect software and hardware investments.

To be eligible for Vocational Rehabilitative Services (VRS), a person: must have one or more physical or mental impairments which constitute or result in a substantial impediment to employment; be able to benefit from VRS in terms of employment; and require VRS to prepare for, enter, secure, retain, or regain employment.

IRIS is used to ensure fiscal accountability. On-line, real-time reports through IRIS are available statewide to all VR staff. Analyze trends, identify problem areas, target areas for intervention, implement corrective actions, and monitor results.

Approximately 170 Vocational Councilors use IRIS to services VR clients and to track 35,000 plus service providers.

IRIS was deployed by Software AG and is currently supported and maintained by Deloitte Consulting through June 2006. Annual cost for the application only is approximately $320,000 and is seventy-eight percent funded by federal grants.

The IRIS server operating system is Citrix-based Client Server/ WAN Application. IRIS development language is Visual Basic and is a SQL 2000 Database with Crystal Reporting. IRIS

interfaces with FSSA CMS (real-time updates of claims) and WRIDB (batch processing to cross check VR services against TANF criteria).

DART

Reference Documents

- 'Technology & Contract Consolidation 8-9-05.xls'
- Interview with Rob Posluszny 8.23.05
- 'RFP-4-46.doc', '46attd.doc', '46atte.doc', '46attf.doc', '46attf(27AUG04)v2.doc', 'Request for Clarification (27AUG2004).doc', 'RFP 4-46 Recommendation Letter.pdf'

System Overview

Developmental Disabilities Automated Resource Tool (DART) is a case management tool developed for the Bureau of Developmental Disabilities Services (BDDS). DART has several additional functions such as an Incident Tracking system which records initial incidents and follow-up activity relating to the resolution of the incident. DART captures data relating to a customer's future needs, caregiver age, the geographic region and/or where the individual would like to receive services, relative urgency of needs and what services would be most appropriate for the individual.

DART also includes a billing system, which audits a provider's claim against an individual's Individualized Community Living Budget (ICLB) before the claim is paid. Data collected includes client demographics, fiscal information, service needs, and incident report information. Plans call for web based data entry in the future.

DART interfaces include the Bureau of Aging and In Home Services' INsite application. DART and INsite can share customer demographic information. DART reads and writes data to INsite in the course of determining eligibility for individuals for Waiver Services and Incident Reporting WEB (website for incident data entry).

DART was developed by and is maintained and supported by EER/Terry Boyer. DART has approximately 172 BDDS staff, BQIS & Contractor users. DART services nearly 42,000 clients and 200 providers.

DART is a SQL 6.5\Access application with Crystal reporting tools. OMPP has historically had trouble with DART when processing claims. DARTs annual cost is approximately $300K

and is entirely State funded.

INsite

Reference Documents

- 'Technology & Contract Consolidation 8-9-05.xls'
- Interview with Rob Posluszny 8.23.05
- 'RFP-4-46.doc', '46attd.doc', '46atte.doc', '46attf.doc', '46attf(27AUG04)v2.doc', 'Request for Clarification (27AUG2004).doc', 'RFP 4-46 Recommendation Letter.pdf'

System Overview

INsite Case Management system software (Visual FoxPro) was created by Bureau of Aging and In-Home Services (BAIHS) and is used by all Area Agency on Aging (AAA) case managers. The system records all case file information, demographics, eligibility information, activities and instrumental activities of daily living, costs associated with services, vendor information, quality improvement measures, and other associated information.

The INsite tracking systems begins with data entry by case managers. Case managers enter information including demographics, functional assessments level of care, family and community support systems, limitations in activities of daily living (ADLs) and instrumental ADLs, nutrition risk assessment, consumer goals, planned services, costs and frequency of services, funding sources, initiation and stop dates, quality assurance measures, and other data elements. This information is then electronically transmitted to the State office.

Other data relevant to this system includes: the cost and units of personal attendant services, number of providers, costs and time to manage the fiscal activities for consumers, demographics of participants, ICD-9 codes of participants, and total costs of services.

INsite was developed by and is currently supported and maintained by Roeing Corporation. There are approximately 2,000 OMPP, waiver specialists, AAA case managers, AAA staff, other case managers, BAIHS, BDDS and BQIS staff using the application to services over 300,000 clients. INsite currently interfaces with FSSA DART, IndianaAIM systems. Hardware for central office application and data are housed at FSSA Server Farm. The main processing center located at Roeing facility in Lafayette, Indiana. Annual Application cost is five hundred to six hundred thousand a year.

Medicaid Waivers rules and regulations are constantly changing & evolving there are often changes in policy & procedure several times a month. The FoxPro software is ever evolving & requires constant maintenance. Also, data interchange, validity and limits have been constant source of problems for OMPP claims processing.

FSSA Data Warehouse Applications

TANF Data Warehouse/DTS Data Warehouse

Reference Documents

- 'FSSA DTS Budget and Data Warehousing 8.30.2005'
- 'Technology & Contract Consolidation 8-9-05.xls'
- 'TANF Data Warehouse Overview.doc'
- 'DWH Gap Analisys.doc'
- 'Data Warehouse Presentation 8.20.05.ppt'
- FSSA Business Intelligence Fact Sheet

System Overview

The Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) passed by Congress in 1996, created the TANF program, a block grant, time-limited program which replaced the entitlement program, Aid to Families with Dependent Children (AFDC) and the Job Opportunities and Basic Skills Training (JOBS) program. TANF is designed to help needy families reduce their dependence on welfare and move toward economic independence by providing time-limited cash assistance along with supportive services and training. The U.S. Dept. of Health and Human Services (HHS) is responsible for program oversight and establishing rules and regulations related to TANF and the use of block grant dollars. The rules specify the types of reports that states are required to provide to HHS quarterly. To meet the federal requirements, DFC had to collect data from all programs using funds from the TANF Block Grant to provide benefits and services to needy families.

The TANF Data Warehouse project was established to develop the data collection process for DFC. Due to the unique requirements of the PRWORA reporting, a custom application was developed. To facilitate the transfer of funds from the TANF Block Grant to the TANF programs, the warehouse team works with the FSSA TANF Policy staff and the Budget Finance Director and staff to identify target programs. Once the target program is identified, the data warehouse staff meets with the program area to evaluate data and design appropriate interfaces. The technical staff collects the source system data, matches clients across source systems, identifies qualifying persons and/or families, and reports the TANF benefits, services, and financial data to HHS, the Finance Director, and FSSA management. Currently, the Data Warehouse contains over 8 years of historical data.

Over time, the historical data has become an important asset within the agency. The project supports special requests for data and assist with audits of program data and fraud detection.

Another unique feature of the Data Warehouse is the Master Client Index. Many of the data warehouse source systems do not have a unique identifier, such as social security number. The Warehouse project establishes a unique cross system client identifier that is used to locate clients receiving multiple TANF benefits and services. This unique ID is derived during a matching process where demographic information is compared and statistical analysis is applied to find known clients and new clients. As new clients are determined, a new and unique client ID is assigned. A file of all unique clients is maintained during the matching process, and includes the client ID and significant demographic details. The Master Client Index will provide the framework for further integration within the agency.

Current Status (2000 - 2004)

The TANF Data Warehouse is fully implemented and is still operating under the 1999 Final Regulations. New TANF regulations were postponed until after the 2004 Presidential Election.

Team/Resources

The TANF Data Warehouse is managed by a State project manager in conjunction with 2 contracts, Keane and RCR Technology. Keane provides the Project Management and technical support for the project and RCR is contracted to provide Decision Support and Quality Assurance for the project. The total team size is currently 15 FTE which is down from the historical 18.

Technology

The warehouse uses DB2 on the State mainframe to store the central data repository. SQL Server databases are used for data marts that have been developed to support the varying levels of business intelligence reporting requirements. The following databases and software are used by the project:

Databases

- DB2 Version 7: DB2 is maintained on the State's central mainframe and is used to store the Data Warehouse historical data.
- Microsoft SQL Server 2000: SQL Server is used to support some special processing requirements and to develop data marts to support web-based reporting requirements.

Web based reporting and analysis

- Cognos Impromptu and PowerPlay. This software enables clients to access the organized data in the TANF Data Warehouse. This tool enables business users to support their decisions by utilizing multidimensional analysis, reporting and monitoring capabilities.

Data Cleansing

- Ascential QualityStage Software: The QualityStage software is used to cleanse and integrate data from many disparate data sources by standardizing and uniquely identifying common clients through a rules based engine. The QualityStage software is the internal replacement for the Vality process mentioned earlier.

Extract Transform Load (ETL) Process

- Ascential/DataStage: The project is undergoing a transition at this time. The current ETL processes (Extract, Transform and Load) which are developed in COBOL on the mainframe are being migrated to the Ascential/DataStage tool.
- The Ascential ETL software is a premier data movement tool in the Data Warehouse market place. This tool enables the TANF Data Warehouse to quickly incorporate new source data into organized information, so that the client has the quickest access to data.

Metadata Process

- Ascential/MetaStage: In addition, the MetaStage software is a repository that enables all definitions, business rules and special processing to be stored into the system for future reference and for data standardization across all source systems.

OMPP MedInsight Data Mart

Reference Documents

- Overview Documents for Data Warehouse projects
- Meeting Minutes for 9/2 Med Insight Data Mart teleconference with Mike Fowler (OMPP Budget and Data Director) – see 'IN FSSA Current State meeting notes 9-02-2005.doc'
- Independent product research on www.milliman.com web site

System Overview

MedInsight Data Mart – OMPP data warehouse with data from Indiana AIM. MedInsight is a 3rd party product developed by Milliman (www.milliman.com). Company product description follows:

"MedInsight is a powerful, comprehensive data warehousing approach developed specifically for the healthcare marketplace. It can be used as a standalone system or integrated with existing systems and initiatives.

MedInsight offers the advantages of rapid deployment, open systems architecture, and proven healthcare-oriented data structures. It works with existing claims, enrollment, and medical management systems, so data warehousing capability can be added without abandoning current operational systems. Integrated with existing data warehousing systems and initiatives, MedInsight helps healthcare organizations harness and leverage the power of the industry's most comprehensive performance measurement and analysis product.

MedInsight operates on both the Microsoft SQL Server and Oracle database platforms. Access to reports and information is provided through thin-client browser-based tools, allowing access anytime and anywhere"

OMPP licenses MedInsight to perform Medicaid reporting functions, including

- Medicaid recipients / clients only
- Paid and incurred claims
- Fiscal analysis
- Legislative inquiries
- Value added statististics
- Actuarial data analysis
- Chronic Disease Management (CDM) grouping
- High and low risk grouping

Source systems for MedInsight include

- AIM
- ICES (spend down data)
- ISETS
- IDWD

OMPP does *not* use MedInsight for

- SUR reporting (could be added, but contracted through Medstat and HCE
- Canned federal reporting
- Waste, fraud and abuse

History:

- 9-10 months in use, implementation is complete
- Instant / near instant response
- Replaced MedStat – previously in use for 8 years, reports took months to develop

Current status:

- There are approximately 60 OMPP and Contracted users of MedInsight.

- Moving onto "value added" usage, expansion contemplated into Audits, Waivers, Nursing homes
- MedInsight is a SQL Server relational database and uses Crystal Reports as the standard reporting tool and a driver for Cubes utilized by policy analysts. The MedInsight server is housed in Seattle and supported in Indianapolis.
- Initial system cost was approximately $1.2M and incremental costs have been approximately $500,000.
- Currently spending about $800,000 per year, including Milliman support staff; would be about $650,000 per year without staff support
- Procurement was sole sourced, OMPP receiving FFP at 50% Medicaid admin rate; funding for implementation included 75% packaged software reimbursement rate

OMPP AIM Data Mart

Reference Documents

- 'DWH Gap Analysis.doc'
- Meeting Minutes for 9/6 AIM Operational Data Mart teleconference with Mike Fowler – see 'IN FSSA Current State meeting notes 9-02-2005.doc'

System Overview

AIM Operational Reporting Data Mart – Operational reporting on claims data from the MMIS (AIM). Provides claims reporting on paid and incurred basis, not just ala EDS claim specific basis.

Business objects EIS tool

- "Free" (included in fixed price) addon tool to AIM
- Daily and weekly raw transaction reports
  - Useful for data team to analyze day enrollment, specific policy initiative support
- Very light usage by OMPP

First Steps Data Mart

Reference Documents

- 'DWH Gap Analisys.doc'

System Overview

Operational reporting on children served in program, services, providers, enrollments and demographics.

DMHA Data Mart

Reference Documents

- 'DWH Gap Analisys.doc'
- Contact Paula Barrickman

System Overview

The DMHA data mart contains data to assist DMHA with meeting the federal reporting requirements. The DMHA Data Mart has 20 regular users and plus an additional ten users who have been granted access to the system.

The data mart uses Cognos Business Intelligence Reporting Tool. The Cognos Business Intelligence (BI) reporting and analytical software is supported by the FSSA Division of Technology Services (DTS). The DMHA has four integrated data sources and generates 35 web based reports and 1 cube. Cognos PowerPlay and Microsoft Access are the data mart analytical tool.

DMHA Data Mart has a Windows Operating System for reporting and is a Microsoft SQL Server DBMS and DBMS OS. The database resides within the State Network and is stored on a dedicated server and is updated weekly. The database is both relational and Star, that is used for reporting purposes. Currently, State Fiscal Years 2001-2005 historical data is available although there are plans to add 1998 – 2000. The Database is 4-5 GB, 100K consumers, 4-5M services per year. Report data is validated against source system data and ETL transforms meets FSSA standards.

CHIP Hoosier/Healthwise

Reference Documents

- 'DWH Gap Analisys.doc'
- Contact: Jim Perez with ICES Project Team

System Overview

The CHIP Hoosier/Healthwise data mart contains eligibility data for operational reporting only and shares Cognos Business Intelligence for reporting and analytical software with FSSA data repositories. The data mart reports on the number of clients' enrolled, closed and denied in terms of CHIP program eligibility. CHIP Hoosier/Healthwise is a reporting sub-system of ICES asit's eligibility data is generated from ICES.

Cognos DTS Operational Reporting

Reference Documents

- FSSA BI Fact Sheet.doc

System Overview

- Cognos DTS Operational Reporting is used for
    - ICES
    - OMPP Estate Recovery
    - Measurement reporting

- Electronic Benefits Transfer (EBT)

Social Service Data Warehouse initiative

Reference Documents

- Meeting Notes 'IN Eligibility Improvement project; technical track'
- Meeting Notes 'FSSA DTS Budget and Data Warehousing 8.30.3005'

System Overview

- Vision
  - Consolidate TANF, DMHA, OMPPP, Hoosier data marts
  - Add Child Support, Child Welfare systems
  - Add Case Management system data
  - Consolidate FSSA reporting infrastructure
  - Provide quality measurement & reporting capability
  - Provide Federal reporting capability
- Status

  DD Data Warehouse is a currently active and maintained by Forrester who has an approximately 30K contract for services spending.
  The SS Data Warehouse vision includes the Enterprise Data Integration Architecture (see section below). It is thought that this vision implementation may be funded via CMS MITA funding support

Enterprise Data Integration Initiatives

Reference Documents

- 'FSSA IT Vision.pdf'
- 'Data Warehouse Presentation 8.20.05.ppt'
- Overview and Status of Strategies

System Overview

Key initiatives:

- OMPP MITA
- Public Health AHRQ Health Information Network Pilot Project
- State CTO – ESB RFP development and Cape Clear pilot in DOR
- Social Services Data Warehouse initiative
- Common Intake and Assessment initiative

FSSA Enterprise Client Identifier

IN FSSA is currently working on a new project to link all TANF sources (listed in the FSSA Data Warehouse PowerPoint presentation) to the Enterprise Client Identifier. FSSA's expected completion for linking all TANF sources to the client index is the end of 2005.

The 6 systems currently linked via the Enterprise Client Identifier are ICES, ICWIS, ISETS, Child Care (BCD), DMHA, and First Steps and are generated monthly. The additional sources FSSA is working to have linked by the close of 2005 are:

- Children's CHOICE, monthly
- Earned Income Tax Credit (EITC) – generated monthly
- Individual Development Accounts (IDA) – generated twice per year
- State Student Assist. Comm. IN (SSACI) – generated twice per year
- Textbook Reimbursement – generated once per year

Indiana OIT Enterprise Services Bus (ESB) solution procurement

The CTO is currently preparing an RFP to procure services for a state-wide enterprise infrastructure implementation. Cape Clear is currently being piloted in the Division of Revenue.

Other key FSSA systems

AIM / MMIS
Indiana's Advanced Information Management System (AIM) / Medicaid Management Information System (MMIS)

Reference Documents
The following AIM (MMIS) information was requested from FSSA and DTS Staff:

- 'Technology & Contract Consolidation 8-9-05.xls'
- Interview notes with Tom Robison (EDS OMPP Liaison) 8.23.2005

System Overview
Indiana's Advanced Information Management system is the state's Medicaid Management Information System (MMIS): Medicaid claims payment and tracking system. AIM was implemented in 1995 by EDS and there was a subsequent procurement implemented in 1998 that included claims management services, policy SUR subsystem, Pharmacy Drug reporting, and migration to SUN hardware for increased transactional capacity. There are currently no procurement activities underway.

AIM can handle standardized HIPAA EDI transactions including the ASC X12N 837.

DTS is currently aware of EDS 'Interchange' MMIS but is not currently working with EDS to procure the up-graded system. There is interest in adopting "ICE" – the 'Interchange' .Net front end that is currently being developed in Wisconsin and deployed in Connecticut.

Vsion is to consolidate current claim processing into a combined business process and systems service in AIM. However, AIM does not support the desire to consolidate claims payment processes. AIM System Modifications are costly because of platform limitations and add approximately 40% in cost. It is estimated that First Steps claims processing could be implemented in Interchange for 20% less than it will cost implement First Step claiming activities into AIM. It is estimated that 'Interchange' implementation would take approximately 1year and that the system would pay for itself after 2 years. However, financing such a move would require some creative thinking such as using HIPAA remediation as justification.

Currently the AIM eligibility validation process is a batch interface with ICES. ICES batch process does not have real time capabilities and ICES has many limitations. As a result many eligibility related business process rules that have been implemented in AIM / MMIS. ICES data validation is poor, forces data cleansing mitigation changes in AIM.

AIM platform is CASE tool – LBMS

- COBOL
- Web browser front-end for CMS

PeopleSoft

FSSA is part of a state initiative to implement PeopleSoft for ERP and financial management/accounting requirements. The state has yet to publish an implementation strategy and time line indicating how FSSA and other Administrations will be effected, at this time. It should be noted that the implementation plan and timeline has been requested.

Indiana DTS Operations

Reference Documents

- 'Benefits.pdf'
- 'ICES Deloitte Contractor Organization Chart'
- 'ICES Organizational Chart.doc'
- 'ICWIS Organizational Chart.doc'
- 'ISETS Organizational Chart.ppt'
- 'IT Functions Outsourced & Vendors List.xls'
- 'Salary Scale.pdf'
- 'Staff Headcount (Staff and Consultants).xls'
- Contract Worksheet, Soft Copy
- Overview of Disaster Recovery Plan Draft/WIP
- Physical Asset Inventory Draft/WIP
- Status of PeopleSoft Implementation and Plan

Overview

There are 280 people currently working in the Department of Technology Services, 165 of whom are consultants and 115 who are state employees. The DTS teams consultant/state break down is as follows:

- ICES team is composed of 8 State employees and 51 consultants
- ICWIS team is composed of 2 State employees and 26 consultants
- ISETS team is composed of 14 State employees and 56 consultants

Further detail is noted in the 'Staff Headcount' document noted in the Current State Reference Index section below. Also found in that section is IT Functions Outsourced & Vendors document listing all the contracted employees throughout DTS. This lists staff by name, vendor for whom they work, the agency and application they work with, and where they are located. FSSA – DTS employees are located at two work sites, Indiana Government Center South houses and 132 E. Washington St. Indianapolis, IN 46204. The Attachment Staff Headcount indicates which location is the primary location to each employee. Attachment ISETS Organization Chart and ICWIS Organization Chart indicates the key managers, employee groups, and functional groups.

Physical Infrastructure

Currently both State and FSSA data centers exist with an initiative to move the FSSA data center to the State. However, it is imperative to maintain some of the capability in FSSA given competing priorities under State data center SLA.

Business Process Improvement

Current Business Process Reengineering initiatives are currently focused on

attaining MITA level 1 and adapting a 'LEAN' Methodology.

- DTS role is to define process & standards
- KSM team must understand field process: must go visit the Welfare offices and see how they use technology and serve clients
- Must understand organizational issues related to BPR in technical change; e.g., from mainframe to ESB, fundamental operating procedures will change in DTS
- Engage Jeanne LaBrecque as policy and business lead
- Leverage Forrester relationship

Disaster Recovery Plan

An updated Disaster Recovery Plan has been requested from DTS to inform RFI respondents. The updated plan has not been published at this time.

Issues

The following is a list of Issues to be tracked against the Current State:

1. FSSA DTS is understaffed with Business Analyst, technical writing and training skills for the needs of FSSA on an organizational level. DTS staff skills are more strong development and project management.
2. It has been FSSA and DTS experience that ICES is expensive to maintain and as a result there is a significant backlog of required changes. **Note: this has resulted in required eligibility business rules being built into other applications (e.g. AIM) as a work around, rather than being maintained centrally.**
3. Areas where required changes are noted as backlogged are:
    - Medicaid for Disabled
    - MRT (Medical Review Team)
    - Medical eligibility determination
    - Eligibility determination process
    - Re-determination:
        - Clients remain enrolled in public programs well after eligibility span is expired
        - Alerts are sent to management, but are not processed
        - re-determinations are delayed due to
            - Fewer case workers and high attrition rate
            - Medicaid processes have become increasingly complex with the addition of programs and growing client population
4. Redundant data entry into assessment and eligibility systems is prevalent and problematic
5. Currently FSSA operations exist in silos as clients are required to visit different locations to receive benefits; Shared benefit receipt locations have been implemented successfully for only one program.
6. Public Health is a willing external player, wants to participate in the Eligibility Improvement project. Note that Public Health is sponsor of AHRQ health data network pilot project